LETTER AGREEMENT TEMPLATE

ASSIGNMENT OF TRANSMISSION SERVICE PILOT PROGRAM FOR SECTION 23 OF THE TARIFF WITH

BONNEVILLE POWER ADMINISTRATION TRANSMISSION BUSINESS LINE (TBL)

(Date)					
(BPAT Account Executive's name) BPAT Account Executive Bonneville Power Administration P. O. Box 61409 – MS TM-OPP-2 Vancouver, WA 98666					
Dear (BPAT Account Executive's name)					
Re:	Pilot Program for Assignment of Transmission Service Under Contract xxTX-xxxx Assignee's PTP contract number is xxTX-xxxxx Aref # (to be filled in by BPA)				
(Reseller) and (Assignee) hereby notify BPA of the assignment of (amount of capacity being assigned in MW) of transmission service from (Reseller) to (Assignee) effective (date) until (date) in accordance with Section 23 of BPA's Open Access Transmission Tariff (OATT). [If assignment end date coincides with Reseller's contract termination date, include the following sentence: If the end date of the assignment coincides with the termination date of the Reseller's contract, then any Section 2.2 rollover rights will flow to the (Assignee or Reseller- select one).]					
The (Reseller's) contract Point of Receipt (POR) (Assignee) will use is The (Reseller's) contract Point of Delivery (POD) (Assignee) will use is					
(Assignee) will assume all obligations including scheduling and payment obligations from (Reseller) for this assigned transmission. All BPAT OATT, Rates, and Business Practice responsibilities are assumed by the Assignee. However, (Reseller) will be responsible to remedy billing payment deficiencies of Assignee including any penalties within 30 days of notice.					
Thank you for your assistance. Please contact (Reseller's contact name and phone number) of (Reseller's Company Name) or (Assignee's contact name and phone number) of (Assignee's Company Name) to discuss any details regarding the assignment.					
EXECUTED:		EXECUTED:			
FULL NAME	OF RESELLER	FULL NAME OF ASSIGNEE			
Ву		By			
Name(Print/Type)		Name(Print/Type)			

Date____

ACCEPTED:

BONNEVILLE POWER ADMINISTRATION

Title _____

Date ____

By	 	
Name		
(Print/Type)		
Title	 	
Date		